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FEC FORM 2

STATEMENT OF CANDIDACY

1	(a) Name of Condidate (in full)									
1.	(a) Name of Candidate (in full)									
	Yoder, Kevin, , ,	 Check if address changed				2 Candidata's FFC Identification Number	_			
	(b) Address (number and street) 14521 Mastin St	₹ Che	eck if address	cnanged		Candidate's FEC Identification Number H0KS03137				
	(c) City, State, and ZIP Code					3. Is This New Amended				
	Overland Park		KS	6622	1-7531	Statement (N) OR (A)				
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate	_			
	REPUBLICAN PARTY	House			KS	03				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
	NOTE: This designation should be f	led with the appr	opriate office	listed in th	ne instructions.		_			
	(a) Name of Committee (in full)									
	Yoder for Congress,	Inc								
	(b) Address (number and street) PO BOX 26742									
	(c) City, State, and ZIP Code						_			
	Overland Park				KS	66225-6742				
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)									
		(Inc	cluding Joint F	Fundraisin	g Representativ	es)				
		(Inc	cluding Joint F	Fundraisin	g Representativ					
	I hereby authorize the following nam	(Indicated committee, w	cluding Joint F	Fundraising	g Representativ al campaign con	es)				
	I hereby authorize the following nam candidacy.	(Indicated committee, w	cluding Joint F	Fundraising	g Representativ al campaign con	es)	_			
	I hereby authorize the following name candidacy. NOTE: This designation should be find the following name of Committee (in full)	(Indicated committee, w	cluding Joint F	Fundraising	g Representativ al campaign con	es)	_			
	I hereby authorize the following name candidacy. NOTE: This designation should be formulated (in full) RISE Project (b) Address (number and street)	(Indicated committee, w	cluding Joint F	Fundraising	g Representativ al campaign con	es)				
	I hereby authorize the following name candidacy. NOTE: This designation should be five following name of Committee (in full) RISE Project (b) Address (number and street) PO Box 2485	(Indicated committee, w	cluding Joint F	Fundraising	g Representativ al campaign con	es)				
	I hereby authorize the following name candidacy. NOTE: This designation should be five following name of Committee (in full) RISE Project (b) Address (number and street) PO Box 2485 (c) City, State, and ZIP Code Springfield	(Included committee, was led with the prince	cluding Joint F	Fundraising	g Representativ al campaign con ee. VA	es) nmittee, to receive and expend funds on behalf of my				
	I hereby authorize the following name candidacy. NOTE: This designation should be five following name of Committee (in full) RISE Project (b) Address (number and street) PO Box 2485 (c) City, State, and ZIP Code Springfield	(Included committee, was led with the prince	cluding Joint F	Fundraising	g Representativ al campaign con ee. VA	es) nmittee, to receive and expend funds on behalf of my 22152-0485				
Siç	I hereby authorize the following name candidacy. NOTE: This designation should be find the final of the fina	(Included committee, was led with the prince	cluding Joint F	Fundraising my principa n committee	g Representativ al campaign con ee. VA	es) nmittee, to receive and expend funds on behalf of my 22152-0485 and belief it is true, correct and complete.				
Siç Yo	I hereby authorize the following name candidacy. NOTE: This designation should be five and the	(Included committee, while disconnection of the prince of	cluding Joint F	Tundraising my principa n committe ne best of the	g Representativ al campaign con ee. VA my knowledge a ronically Filed]	es) nmittee, to receive and expend funds on behalf of my 22152-0485 and belief it is true, correct and complete. Date				
Siç Yo	I hereby authorize the following name candidacy. NOTE: This designation should be five and the	(Included committee, while disconnection of the prince of	cluding Joint F	Tundraising my principa n committe ne best of the	g Representativ al campaign con ee. VA my knowledge a ronically Filed]	es) nmittee, to receive and expend funds on behalf of my 22152-0485 and belief it is true, correct and complete. Date 02/06/2017				

FEC FORM 2 (REV. 02/2009)

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 / S
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is No candidacy.	OT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE:This designation should be filed with the prin	ncipal campaign committee.	
(a) Name of Committee (in full)		
Americans for BBQ 2016		
(b) Address (number and street) 824 S Milledge Ave, Ste 101		
(c) City, State and ZIP Code		
Athens	GA 30605-1332	
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is N candidacy.	IOT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE:This designation should be filed with the prin	ncipal campaign committee.	
(a) Name of Committee (in full)		
Americans for BBQ		
(b) Address (number and street) 2470 Daniels Bridge Rd		
(c) City, State and ZIP Code		
Athens	GA 30606-6187	
	OF OTHER AUTHORIZED COMMITTEES luding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is N candidacy.	IOT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE: This designation should be filed with the prin	ncipal campaign committee.	
(a) Name of Committee (in full)		
BHY Committee		
(b) Address (number and street) c/o Michael Goode		
824 S Melledge (c) City, State and ZIP Code		
Athens	GA 30605-1332	

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) Yoder Victory Fund (b) Address (number and street) 901 N Washington St (c) City, State and ZIP Code Alexandria VA 22314-5509 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code